

● PRINTER RUSH ●
(PTO ASSISTANCE)

I FW

Application :	Examiner :	GAU :	
<u>09/435540</u>	<u>Parton, K</u>	<u>2153</u>	
From:	Location:	Date:	
<u>S. G. C.</u>	<u>IDC FMF FDC</u>	<u>2-9-05</u>	
Tracking #:		<u>06058327</u>	Week Date: <u>12-27-04</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>05-27-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

<p>[RUSH] MESSAGE: <u>Original Claim 35 depend on original claim 32, which is cancelled. Please Resolve.</u></p> <hr/> <hr/> <hr/> <hr/> <hr/>
<u>Thank You</u> <u>JK</u>

<p>[XRUSH] RESPONSE:</p> <hr/> <hr/> <hr/> <hr/> <hr/>
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INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04